Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Complete if Known					
FEE TRANSMITTAL					Application Number		87			
					Filing Date 8					
For FY 2009					2 1100 1 101111 1 1 1 1 1 1 1 1 1 1 1 1		hn Batte	rham		
Applicant claims small entity status. See 37 CFR 1.27					Examiner Name		Zhu			
					Art Unit		45700			
TOTAL AMOUNT OF PAYMENT (\$) 180					Attorney Docket 4623 - 045790					
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order Other (please identify):										
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s)										
under 37 CFR 1.16 and 1.17 Credit any overpayments										
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)										
1. BASIC FILING, SEARCH, AND EXAMINATION FEES										
FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity										
Application Ty		Fee (\$)		ree (\$)	Fee (\$)	Fee (\$)		Fees P	aid (\$)	
Utility	330	82	540	270	220	110			•	
Design	220	110	100	50	140	70				
Plant	220	110	330	165	170	85				
Reissue	330	165	540	270	650	325				
Provisional	220	110	0	0	0	0				
2. EXCESS CLAIM FEES									Small Entity	
Fee Description Each claim over 20 (including Reissues) 52									<u>Fee (\$)</u> 26	
Each independent claim over 3 (including Reissues)								220	110	
Multiple dependent claims								390	195	
Total Claims	- 20 or HP	Extra Clai	ms Fee	<u>(\$)</u>	Fee Paid (\$)		<u>r</u>		pendent Claims	
	=		x	=				Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.										
Indep. Claims	<u>-3 or HP</u>	Extra Clai			Fee Paid (\$)					
HP = highest number	= r of independent clair		X x	=						
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under										
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
100 = / 50 = (round up to a whole number) x =										
4. OTHER FEE(S) Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount) Other (a.g., late filing gyachange), Submission of Symplomental IDS after mailing of lat Office Action \$120										
Other (e.g., late filing surcharge): Submission of Supplemental IDS after mailing of 1st Office Action \$180										
SUBMITTED BY										
Signature	X)))	Madein	1 h Chr	n Re	egistration No. attorney/Agent)	28,498	Telepho	one 41	2-471-8815	
Name (Print/Type) Richard L. Byrne Date November 3, 2009									ber 3, 2009	